Financial *	Prof	FORM FRQ Registration # FR7-1 Report Quarter	
147.0	NEW JERSEY (609) 292-8	COMMISSION Apr. 15. 2018	
PLEASE PRINT OR T	🗍 Jan 15,		
Name of Professional C Erin Ehrich	Check if No Activity This Quarter		
Business Name EME Consul	FOR STATE USE ONLY		
Business Address (Nur PO Box 305	5LEC RECEIVE		
Business Address (City Mercerville.			MAY - 4 2020
Day Telephone (with A (609) 468-82		Evening Telephone (with Area (609) 468-8282	Code)*
Check if Amendment	······································		
Ī	itements on this doc	essional Campaign Fundraiser's ument are true and correct. I am aw ubject to punishment.	Certification vare that if any of the statements on this

Erin M. Ehrich

Print Full Name of Professional Campaign Fundraiser

Signature of Professional Campaign Fundraiser

Please use a se Name of Recipien Amount(s) Raisec Please use a se Recipien	t Candidate or Committee It Candidate or Committee Lan For Schell d This Period (Gross) Amount(s) Raised This Period (OS1. OS \$ 32.633.50	od (Net) Compensation Received B	y Fundraiser For This Period
PAYMENT DATE	Itemized Ex	penditures PURPOSE OF EXPENDITURE	AMOUNT
12/8/17 12/12/17 12/17/17	Walnut WT	labels Postage gifts gifts gifts Postage	\$ 41.65 735.00 55.86 38.22 162.00 98.00
"Total" reflecte s	all expenditures made on behalf of the candidate or o	ommittee named above	\$ 1130.75

Recipient of Professional Campaign Fundraiser's Services Q1 201% Please use a separate page for each candidate or committee								
					·			
Name of Recipient Candidate or Committee School (Gross) Amount(s) Raised This Period (Gross) \$ 48,000.00			Net) Compensation Received By Fundraiser For This Period					
				\$ 12000.00				
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	Itemized Expenditures							
PAYMENT DATE	PAYEE NA	ME AND ADDRESS		PURPOSE OF EXPENDITURE	AMOUNT			
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"Total" reflects a	all expenditures made or	behalf of the candidate or comm	nittee n	named above. Total	\$ - 0 -			